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CONFIRMATION NO. 1662

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/693,154	10/23/2003 RULE	297	3636	22630/112030-05
<b>APPLICANTS</b> Niels Diffrient, Ridgefield, CT;				
<b>** CONTINUING DATA *****</b> This application is a DIV of 10/155,331 05/24/2002 PAT 6,959,965 and is a DIV of 09/326,176 06/04/1999 PAT 6,709,058 and is a CIP of 29/103,157 04/09/1999 PAT D,435,746 and is a CIP of 29/103,158 04/09/1999 ABN * and is a CIP of 29/103,159 04/09/1999 PAT D,453,633 (*Data provided by applicant is not consistent with PTO records.				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 09/02/2004				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY CT	SHEETS DRAWING 28	TOTAL CLAIMS 9
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 5		
<b>ADDRESS</b> 33222				
<b>TITLE</b> ERGONOMIC ARMREST				
<b>FILING FEE RECEIVED</b> 1436	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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